

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L01000007336**

1. Entity Name  
PINELAND DEVELOPMENT, LLC



Principal Place of Business  
255 MAGNOLIA AVE., SOUTHWEST  
WINTER HAVEN, FL 33880

Mailing Address  
P.O. BOX 2295  
WINTER HAVEN, FL 33883-2295



02132007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3730316

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

TURNER, MARK G ESQ.  
255 MAGNOLIA AVE.  
WINTER HAVEN, FL 33880

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGRM  
NAME TURNER INVESTMENTS, LTD.  
STREET ADDRESS P.O. BOX 2295  
CITY-ST-ZIP WINTER HAVEN, FL 338832295

TITLE MGRM  
NAME DARDEN, DOUGLAS  
STREET ADDRESS P.O. BOX 9309  
CITY-ST-ZIP WINTER HAVEN, FL 338839309

TITLE MGRM  
NAME BAKER, CECIL  
STREET ADDRESS P.O. BOX 536  
CITY-ST-ZIP LAKE ALFRED, FL 33850

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000639308  
02/28/07-60021-001 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

MARK G. TURNER, President of turner management Services Corporation, General Partner  
of Turenr Investments, Ltd., a Member

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

(863) 293-1184

Date 2/16/2007 Daytime Phone # \_\_\_\_\_